4003-341 Professional Communications

Group Self Review Form

Due November 8, 2012

Your Name: _____________________________________________________________

1 Instructions

Complete this form after your group makes its group presentation. This form provides a mechanism for you to evaluate the contributions of each group member to the presentation. Your comments will be kept confidential. Turn in this form in such a way as to preserve confidentiality. Please answer all questions thoughtfully and honestly; your responses are a significant factor in any potential grade adjustments for the group presentation. Circle either yes or no, or a number from 1 to 5, depending on the question. ‘1’ represents unacceptable, ‘2’ represents poor, ‘3’ represents average, ‘4’ represents good, and ‘5’ represents excellent.

You must turn in this form no later than 6:00pm on the date indicated above. In fact, it would be most helpful (and probably easier for you) if you turned in this form within 24 hours after giving your presentation. Turn in this form either in class, or by placing it in the mailbox outside of my office.

2 Grading

This assignment is worth a maximum of 3 points toward the “Other Assignments” category.

3 Group Member Evaluations

Rate yourself first. Then use as many sections as necessary to rate each member of your group. Be sure to fill in each person’s first and last name.

1. Did you complete your assigned tasks? No Yes
2. How would you rate the quality of your work? 1 2 3 4 5
3. How would you rate yourself on completing work on time? 1 2 3 4 5
4. How would you rate the quantity of work you did? 1 2 3 4 5
5. How would you rate your level of cooperation? 1 2 3 4 5
6. How would you rate your overall performance? 1 2 3 4 5

1 Adapted from RIT DCS, H. Etlinger
Name of group member: ___________________________________________________

1. Did this group member complete his or her assigned tasks? No Yes
2. How would you rate the quality of this person’s work? 1 2 3 4 5
3. How would you rate this person on completing work on time? 1 2 3 4 5
4. How would you rate the quantity of work done by this person? 1 2 3 4 5
5. How would you rate this person’s level of cooperation? 1 2 3 4 5
6. How would you rate the overall performance of this person? 1 2 3 4 5
7. Would you want to work with this person again? No Yes

Use the following space for any general comments or for explanations that pertain to your ratings on individuals (optional).